



318180

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 6
1445 ROSS AVENUE, SUITE 1200
DALLAS, TX 75202-2733

September 13, 2001

BOEING 91 05
13150 SPACE CENTER BLVD
HOUSTON, TX 77059
ATTN: BOB HAMMOND, SAFETY ENGINEER

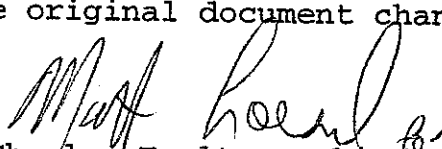
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This is to acknowledge that, in compliance with Section 3010 of the Resource Conservation and Recovery Act (RCRA), you have filed a Notification of Regulated Waste Activity for:

BOEING 91 05
13150 SPACE CENTER BLVD
HOUSTON, TX 77059

Your EPA Identification Number for this installation is:
TXR000043927

The EPA Identification Number must be included in all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous wastes, and owners and operators of hazardous waste treatment, storage, and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste reports and documents required under Subtitle C of RCRA. A Subsequent Notification of Regulated Waste Activity is required should any information on the original document change.


Charles Faultry, Chief
RCRA Information Management Section

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only.

Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

AUG 21 2001

EMERG WASTE EVALUATION

Date Received
for Official Use Only
SEP 10 2001

INFORMATION

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. Initial Notification



B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

TXR0000043927

II. Name of Installation (Include company and specific site name)

BOEING 91-DS

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

13150 SPACE CENTER BLVD.

Street (Continued)

City or Town

HOUSTON

State

TX

Zip Code

77059-

County Code

County Name

201 HARRIS

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

13100 SPACE CENTER BLVD.

City or Town

HOUSTON

State

TX

Zip Code

77059-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

HAMMOND

(First)

BOB

Job Title

SAFETY ENGR.

Phone Number (Area Code and Number)

281-244-4875

VI. Installation Contact Address (See instructions)

A. Contact Address
Location Mailing



B. Street or P.O. Box

City or Town

State

Zip Code

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

SIMPKINS GROUP

Street, P.O. Box, or Route Number

2900 WESLEYAN SUITE 350

City or Town

HOUSTON

State

TX

Zip Code

77027-

Phone Number (Area Code and Number)

713-963-0885

B. Land Type

P

C. Owner Type

P

D. Change of Owner
Indicator

Yes

No

(Date Changed)
Month Day Year

BB
8/30/01
#47

9-12-01
\$

Todd T.

RECEIVED

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved, OMB No. 2050-0028 Expires 10/31/99
GSA No. 0246-EPA-OT

AUG 21 2001

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
 - ☐ a. Greater than 1000kg/mo (2,200 lbs.)
 - ☒ b. 100 to 1000 kg/mo (220-2,200 lbs.)
 - ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
 - ☐ a. For own waste only
 - ☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see Instructions.
- 4. Hazardous Waste Fuel
 - ☐ a. Generator Marketing to Burner
 - ☐ b. Other Marketers
 - ☐ c. Boiler and/or Industrial Furnace
 - ☐ 1. Smelter Deferral
 - ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)
 - ☐ 1. Utility Boiler
 - ☐ 2. Industrial Boiler
 - ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Recycling Marketer
 - ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
 - ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device
 - ☐ a. Utility Boiler
 - ☐ b. Industrial Boiler
 - ☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Combustion Device(s)
 - ☐ a. Transporter
 - ☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
 - ☐ a. Process
 - ☐ b. Re-refine

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

- | | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------|---|
| 1. Ignitable (D001) | 2. Corrosive (D002) | 3. Reactive (D003) | 4. Toxicity Characteristic | (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s)) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)

1 F001	2 F002	3 F003	4 F005	5 U226	6 U080
7 U123	8 U145	9 U154	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature <i>Jack E. Watts</i>	Name and Official Title (Type or print) <i>Sr. Mgr. Manufacturing OPS-Houston</i>	Date Signed <i>8/17/01</i>
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XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)